

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

|  |   |                          |  |                                   |   |
|--|---|--------------------------|--|-----------------------------------|---|
| <b>NAME OF FILER</b><br>MILES FOR ASSEMBLY 2010, LARRY |   |                          | <b>Date of This Filing</b> 05/05/2010  | Date Stamp<br><br><br>Page 1 of 2 | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>(916)973-9674         | <b>I.D. NUMBER</b> (if applicable)<br>1318360 |                          | <b>Report No.</b> 16   |                                   |   |
| <b>STREET ADDRESS</b><br><br>                          |   |                          | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |                                   |   |
| <b>CITY</b><br>SACRAMENTO                              | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>95821 | <b>No. of Pages</b> 2  |                                   |   |

## Late Contribution(s) Received

| DATE RECEIVED              | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL<br>ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED |
|----------------------------|--|---|---|-----------------|
| 05/04/2010 -<br>05/04/2010 | Drive Committee<br>Washington, DC 20001-2198<br><br>ID# 880969                                   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input checked="" type="checkbox"/> SCC |   | \$1,500.00      |
|                            |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 |
|                            |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 |

### \*Contributor Codes

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other

PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment:

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| <b>CITY</b><br>SACRAMENTO                              | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>95821 | <b>No. of Pages</b> 2  |   |   |

## Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR<br>MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION<br>(IF APPLICABLE) |
|-----------|--|---|------------------------|-------------------------------------|
|           |  |   |                        |                                     |
|           |  |   |                        |                                     |
|           |  |   |                        |                                     |
|           |  |   |                        |                                     |
|           |  |   |                        |                                     |

Reason for Amendment: